PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

1652-1414

CLAIMS AS FILED - PART I (Column 1) (Column 2)						ımn 2)	SMAL TYPE	EI	NTITY	OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			42				RAT	RATE		7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE		OR	BASIC FEE	710.00
TC	TAL CHARGEA	BLE CLAIMS	47 minus 20=		. 22		X\$ 9	X\$ 9=		OR	X\$18=	
INE	DEPENDENT CL	_AIMS	9 minus 3 =		• 6		X40	X40=		1	X80=	
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR		
* If	the difference	in column 1 is	less than a	rero enter	"0" in (0" in column 2		_	<u> </u>	OR	+270=	
,.			MENDED - PART II			TOTAL			793	OR	TOTAL	
	C	(Column 1)	MIENDE	Colur		(Column 3)	SMA	SMALL ENTITY			OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X40	=		OR	X80=	
L	FIRST PRESE	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+135	_	<u>. </u>	1	+270=	
							TO			OR	TOTAL	
	(Column 1) (Column 2) (Column 3)					ADDIT. F	EE		OR	ADDIT. FEE		
		CLAIMS		HIGH		(Column 3)		_	ADDI-	1 1	•	ADDI
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RAT		TIONAL FEE		RATE	ADDI- TIONAL FEE
S	Total	*	Minus	**		=	X\$ 9	-		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	01.411.4	<u> </u>	X40=	.		OR	X80=	
	rinoi Phese	NIATION OF MI	JETIPLE DE	PENDENT	CLAIM		+135	=		OR	+270=	
								AL EE		OR	TOTAL ADDIT. FEE	
_		(Column 1)	-	(Colum		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9:			OR	X\$18=	
	Independent	*	Minus	***		=	X40=	1			X80=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		 	\dashv		OR		_
• 1	f the entry in colu	mn 1 is less than th	ne entry in col	umn 2 write	"0" in co	lumn 3	+135=			OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number						
_		Effec	ctive Octo	ober 1, 2	001				09/	8	7/16	20		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN			
TOTAL CLAIMS			(Column 1) (Column 2)			, '-	TYPE				ENTITY			
FOR			Alliande	NUMBER FILED NUMBER EXTRA			-	RATE	FEE	+	RATE	FEE		
					NUM	BEH EXTHA	-		370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			l - minus 20=		<u>*</u>			X\$ 9=		OR	X\$18=			
 -	DEPENDENT C		ninus 3 =				X42=		OR	X84=				
M	JLTIPLE DEPE	NDENT CLAIM F	RESENT				+140=		OR	+280=				
* [the difference	e in column 1 is	less than a	zero, enter	"0" in (column 2	L	TOTAL	 	OR	TOTAL			
	10	LAIMS AS A	MENDE	D - PAR	TII					1 011	OTHER	THAN		
	H	(Column 1)		(Colur	nn 2)	(Column 3)		SMALL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE-		
M	Total	. 30	Minus	**	42	=		X\$ 9=	6	OR	X\$18=			
RE	Independent	. 7	Miņus	***	9	=	-	X42=	\rightarrow	1	X84=)		
lee	FIRST PRESE	NTATION OF M	ÚLTIPLE DE	E DEPENDENT CLAIM			-	N42-	1-5	ØR	A04=	5		
								140=		OR	+280=			
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE			
_		(Column 1)		(Column 2) (Column 3)			_		,					
AMENDMENT B	44	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA	ľ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	*	Minus	**		=)	K\$ 9=		OR	X\$18=			
ME	Independent	*	Minus	AAA		=		 X42=	<u> </u>	1 1	X84=			
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDENT	CLAIM		-			OR				
								140=		OR	+280=			
							ADI	TOTAL DIT. FEE	L	OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colum		(Column 3)								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	X	(\$ 9=			X\$18=			
	Independent	*	Minus	***		=	-			OR				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<u> </u>	(42=		OR	X84=				
	4							140=		OR	+280=			
***	the "Highest Nur the "Highest Nur	nn 1 is less than th nber Previously Pa mber Previously Pa ber Previously Paid	id For IN TH! lid For IN TH	S SPACE is	less thar less thar	n 20, enter "20." n 3, enter "3,"		TOTAL IT. FEE n the app	propriate box		TOTAL DDIT. FEE Imn 1.			